03/19/2009 10:54

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| F | FORM 3X | For | Other Than Ar | n Authorized | Committee | | Office Use Only |
|-----|--|---|--|----------------------|---|-----------------------|-------------------------------|
| 1. | NAME OF COMMITTEE (in fu | | FEC MAILING LA | | pple:If typing, type the lines | | |
| L | American Council o | of Life Insurers I | Political Action Con | nmittee | | | |
| | | 1 1 1 1 1 | | | | | |
| AD | DRESS (number and | street) | 01 Constitution Ave | e., NW | | | |
| | Check if differ than previously reported. (ACC | ent L | uite 700 | | | DC | 20001 |
| 2. | FEC IDENTIFICAT | ION NUMBER | _ | CITY 🛋 | | STATE | ZIPCODE 🛕 |
| | C00147066 | • • • • • | | 3. IS THIS REPORT | X NEW (N) | OR A | MENDED A) |
| 4. | July 15 Quarterly October 1 Quarterly January 3 Quarterly July 31 M Report(N Year Only | Report(Q1) Report(Q2) 5 Report(Q3) 81 Report(YE) lid-Year on-election | (b) Monthly Report Due On: X (c) 12-Day PRE-Elect Report for Post -Elect Report For -Elect Report For Post -Elect Report For Post -Elect Report For -Elect Report For Post -Elect Report For Post -Elect Report For -Elect Report For Post -Elect Report For - | Election on | May 20 (Jun 20 (I Jul 20 (N Primary (12P) Convention (12C) General (30G) | M6) Sep | in the State of |
| 5. | Covering Period | 02 | 01 200 | | tillough | 2 28 | 2009 |
| | ertify that I have exam be or Print Name of T | | rt and to the best of Mr. Donald L. Walk | | nd belief it is true, con | rect and complete. | |
| Sig | nature of Treasurer | Electronically | y Filed by Mr. Do | nald L. Walker | | Date 03 | 19 2009 |
| NO | TE : Submission of f | alse, erroneous | s, or incomplete info | rmation may subj | ect the person signir | ng this Report to the | e penalties of 2 U.S.C 437g. |
| | Office Use | | | | | | FEC FORM 3X (Rev. 12/2004) |

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003)

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name American Council of Life Insurers Political Action Committee [®] D ^b D 0 2 0.2 28 0 1 2009 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2009 58032.39 January 1 (b) Cash on Hand at 35641.18 Begining of Reporting Period 24563.03 40171.82 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 60204.21 98204.21 6(a) and 6(c) for Column B) 30256.97 68256.97 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 29947.24 29947.24 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

0 1 2^D8 м м 0 2 0 2 M 2009 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 9985.92 7485.14 (i) Itemized (use Schedule A) 2077.89 5185.90 (ii) Unitemized (iii) TOTAL (add 9563.03 15171.82 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 15000.00 25000.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 24563.03 40171.82 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 24563.03 40171.82 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 24563.03 40171.82 (subtract Line 18(c) from Line 19)

23.

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS

(a) Shared Federal/Non-Federal Activity (from Schedule H4)

(b) Other Federal Operating

22. Transfers to Affiliated/Other Party

Contributions to

24. Independent Expenditure

27. Loans Made..... 28. Refunds of Contributions To:

(c) Total Operating Expenditures

26. Loan Repayments Made.....

Individuals/Persons Other

(such as PACs)

(b) Political Party Committees (c) Other Political Committees

(d) Total Contribution Refunds

29. Other Disbursements.....

(a) Shared Federal Election Activity

(i) Federal Share

(ii) "Levin" Share (b) Federal Election Activity Paid Entirely

With Federal Funds (c) Total Federal Election Activity (add

23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

(subtract Line 21(a)(ii) and Line 30(a)(ii)

32. Total Federal Disbursements

from Line 31).....

Lines 30(a)(i), 30(a)(ii) and 30(b))....

(from Schedule H6)

Expenditures.....

21. Operating Expenditures:

Page 4 **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... 0.00 0.00 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))............ 0.00 0.00 Committees..... Federal Candidates/Committees.....and Other Political Committees..... 30256.97 68256.97 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 Than Political Committees 0.00 0.00 0.00 0.00 0.00 0.00 (add Lines 28(a), (b), and (c)) 0.00 0.00 30. Federal Election Activity (2 U.S.C 431(20)) 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 31. Total Disbursements (add Lines 21(c), 22, 30256.97 68256.97

30256.97

68256.97

| FF | Ξ6/ | ΔN | ı۸ | 26 |
|-----|-----|------|----|----|
| 1 L | _0, | ٦ı ٧ | ıv | ۷, |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| | III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-----|---|----------------------------|-----------------------------------|
| 33. | Total Contributions (other than loans) from Line 11(d), page 3) | 24563.03 | 40171.82 |
| 34. | Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. | Net Contributions (other than loans) (subtract Line 34 from Line 33) | 24563.03 | 40171.82 |
| 36. | Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. | Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. | Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

FE6AN026

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS |) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 6 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 1 | | |
|----|---|-----------------------------|---|---|--|--|
| A | ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | Statements mane name and ad | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. | | |
| | American Council of Life Insurers Po | litical Action | Committee | | | |
| | Full Name (Last, First, Middle Initial) Mr. Edward J. Zore | | | Date of Receipt | | |
| | Mailing Address 720 East Wisconsin | Avenue | | 02 10 2009 | | |
| | City Milwaukee | State WI | Zip Code 53202-4797 | Transaction ID: 28231419 | | |
| | FEC ID number of contributing federal political committee. | C | 33202-4191 | Amount of Each Receipt this Period 1250.00 | | |
| | Name of Employer Northwestern Mutual Life Insurance Com Receipt For: Primary General Other (specify) ▼ | | t & Chief Executive Officer e Year-to-Date ▼ 1250.00 | | | |
| | Full Name (Last, First, Middle Initial) Mr. Dennis J. Manning Mailing Address 631 Long Ridge Roa | | | Date of Receipt | | |
| | Unit 22 | 02 13 2009 | | | | |
| | City Stamford | State CT | Zip Code 06902-1258 | Transaction ID: 28253864 Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | 00902-1238 | 500.00 | | |
| | Name of Employer Guardian Life Insurance Company of Ame | Occupatio CEO | | | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 500.00 | | | |
| | Full Name (Last, First, Middle Initial) Mr. Patrick S. Baird | Date of Receipt | | | | |
| | Mailing Address 549 Knollwood Drive | 02 23 2009 | | | | |
| | City | State | Zip Code | Transaction ID: 28400226 | | |
| | Cedar Rapids FEC ID number of contributing federal political committee. | C | 52403-4248 | Amount of Each Receipt this Period 2500.00 | | |
| | Name of Employer AEGON USA, Inc. | Occupation Presiden | n t and CEO | | | |
| | Receipt For: Primary General Other (specify) ▼ | | e Year-to-Date ▼ 2500.00 | | | |
| Γ, | SUBTOTAL of Receipts This Page (optional) | 1 | | 4250.00 | | |

| | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|--------|--|--------------------------------|---|--|
| , A | ny information copied from such Reports and S r for commercial purposes, other than using the | Statements ma e name and ad | y not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) American Council of Life Insurers Pol | itical Action | Committee | |
| ۷. | Full Name (Last, First, Middle Initial) Mr. Walter C. Welsh | | | Date of Receipt |
| | Mailing Address 101 Constitution Ave, 101 Constitution Ave, | | | 02 28 2009 |
| | City | State | Zip Code | Transaction ID: PR1550105916296 |
| | Washington | DC | 20001-2140 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 348.96 |
| | Name of Employer American Council of Life Insurers | Occupation Executiv | n e Vice President | 7 |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 0 0 | 697.92 | P/R Deduction (\$174.48 Semi-Monthly) |
| 3. | Full Name (Last, First, Middle Initial) Mr. Gary E. Hughes | | | Date of Receipt |
| | Mailing Address 101 Constitution Aven Suite 700 West | nue, NW | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City Sta | | Zip Code | Transaction ID: PR771358216296 |
| | Washington | DC | 20001-2133 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 291.66 |
| | Name of Employer American Council of Life Insurers | Occupation Executive | n e Vice Pres & General Couns | se |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 583.32 | P/R Deduction (\$145.83 Semi-Monthly) |
| | Full Name (Last, First, Middle Initial) Ms. Linda H. Cunningham | | | Date of Receipt |
| | Mailing Address 101 Constitution Aven Suite 700 West | nue, NW | | 02 28 2009 |
| | City | State | Zip Code | Transaction ID: PR771362416296 |
| | Washington | DC | 20001-2133 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 101.66 |
| | Name of Employer American Council of Life Insurers | nent | | |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 203.33 | P/R Deduction (\$50.83 Sem- i-Monthly) |
| | SUBTOTAL of Receipts This Page (optional) . | 1 | | 742.28 |

| | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 8 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---------|--|------------------------------------|---|--|
| A C | ny information copied from such Reports and Si r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | name and add | dress of any political committee to s | n for the purpose of soliciting contributions solicit contributions from such committee. |
| | American Council of Life Insurers Polit | ical Action (| Committee | |
| ۸. | Full Name (Last, First, Middle Initial) Mr. J. Bruce Ferguson Mailing Address 101 Constitution Avenu | IO NIM | | Date of Receipt |
| | Suite 700 West | ic, ivv | | 02 28 2009 |
| | City | State | Zip Code | Transaction ID: PR771373216296 |
| | Washington | DC | 20001-2133 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 261.46 |
| | Name of Employer American Council of Life Insurers | Occupatio Senior V | n ice President, State Relations | , |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary ☐ General Other (specify) ▼ | | 522.91 | P/R Deduction (\$130.73 Semi-Monthly) |
| 3. | Full Name (Last, First, Middle Initial) Mr. David M. Leifer | | | Date of Receipt |
| | Mailing Address 101 Constitution Avenu Suite 700 West | ıe, NW | | 0 2 |
| | City | State | Zip Code | Transaction ID: PR771374016296 |
| | Washington | DC | 20001-2133 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 132.34 |
| | Name of Employer American Council of Life Insurers | Occupatio Senior C | ounsel | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 264.67 | P/R Deduction (\$66.17 Sem- i-Monthly) |
| _ ;. | Full Name (Last, First, Middle Initial) Mr. John W. Mangan, CEBS | | | Date of Receipt |
| ·• | Mailing Address 101 Constitution Ave, N Suite 700 | ٧W | | 02 28 2009 |
| | City | State | Zip Code | Transaction ID: PR771377116296 |
| | Washington | DC | 20001-2133 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 200.00 |
| | Name of Employer American Council of Life Insurers | n Vice President, State Relatio | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 400.00 | P/R Deduction (\$100.00 Semi-Monthly) |
| | SUBTOTAL of Receipts This Page (optional) | | _ | 593.80 |

| I7 | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS ny information copied from such Reports and second | Statamente ma | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 9 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---------|---|--------------------------------|---|--|
| | r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Council of Life Insurers Pol | e name and ad | dress of any political committee to | solicit contributions from such committee. |
| ∠ 4. | Full Name (Last, First, Middle Initial) Ms. Kimberly Dorgan | | | Date of Receipt |
| | Mailing Address 101 Constitution Aver Suite 700 West | nue, NW | | 0 2 2 8 2 0 0 9 |
| | City Washington | State DC | Zip Code 20001-2133 | Transaction ID: PR771395116296 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 468.76 |
| | Name of Employer American Council of Life Insurers Receipt For: Primary Other (specify) ▼ | | n e Vice President, Federal Rel e Year-to-Date ▼ 937.51 | P/R Deduction (\$234.38 Semi-Monthly) |
| — В. | Full Name (Last, First, Middle Initial) Frank Keating Mailing Address 101 Constitution Aver Suite 700 West | nue, NW | | Date of Receipt 0 2 2 8 2 0 0 9 |
| | City | State | Zip Code | Transaction ID: PR771419716296 |
| | Washington FEC ID number of contributing federal political committee. | C | 20001-2133 | Amount of Each Receipt this Period 416.66 |
| | Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify) | Occupation President Aggregate | | P/R Deduction (\$208.33 Semi-Monthly) |
| c. | Full Name (Last, First, Middle Initial) Mr. Michael J. Hunter Mailing Address 101 Constitution Avenue, NW | | | Date of Receipt |
| | Suite 700 West City | State | Zip Code | 0 2 2 8 2 0 0 9 Transaction ID: PR771419816296 |
| | Washington | DC | 20001-2133 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 416.66 |
| | Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify) | - ' | e Vice President & COO e Year-to-Date ▼ 833.32 | P/R Deduction (\$208.33 Semi-Monthly) |
| [| SUBTOTAL of Receipts This Page (optional) . | 1 | | 1302.08 |

| SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 10 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 | | | |
|--|--|--|--|--|--|
| Any information copied from such Reports and or for commercial purposes, other than using t | I Statements may not be sold or used by any pers he name and address of any political committee t | on for the purpose of soliciting contributions | | | |
| NAME OF COMMITTEE (In Full) | | | | | |
| American Council of Life Insurers Po | olitical Action Committee | | | | |
| Full Name (Last, First, Middle Initial) Mr. John P. Gerni | | Date of Receipt | | | |
| Mailing Address 101 Constitution Ave Suite 700 | e, NW | 02 28 2009 | | | |
| City | State Zip Code | Transaction ID: PR771428716296 | | | |
| Washington | DC 20001-2133 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C | 121.76 | | | |
| Name of Employer American Council of Life Insurers | Occupation Senior Legislative Director | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | |
| Primary General Other (specify) | 243.51 | P/R Deduction (\$60.88 Sem- i-Monthly) | | | |
| | | | | | |
| Full Name (Last, First, Middle Initial) Mr. Juan Carlos Scott | /Ir. Juan Carlos Scott | | | | |
| Mailing Address 101 Constitution Ave Suite 700 West | Suite 700 West | | | | |
| City | State Zip Code | Transaction ID: PR771428816296 | | | |
| Washington | DC 20001-2133 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C | 131.04 | | | |
| Name of Employer American Council of Life Insurers | Occupation Senior Vice President, Federal Relat | io | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | |
| Primary General Other (specify) ▼ | 262.10 | P/R Deduction (\$65.52 Sem- i-Monthly) | | | |
| Full Name (Last, First, Middle Initial) David C. Turner | | Date of Receipt | | | |
| Mailing Address 101 Constitution Ave Suite 700 | e, NW | 0 2 2 8 2 0 0 9 | | | |
| City | State Zip Code | Transaction ID: PR771428916296 | | | |
| Washington | DC 20001-2133 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C | 195.84 | | | |
| Name of Employer American Council of Life Insurers | Occupation Sr. Vice President and Corp Sec. | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | |
| Primary General Other (specify) ▼ | 391.67 | P/R Deduction (\$97.92 Sem- i-Monthly) | | | |
| | | 448.64 | | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | (check | | one) | 1BER:) 11b 14 | 11c 15 | П | 1 / 29 12 16 | 17 |
|-----------------|--|----------------------|---|-------------|--------|---------|-------------------------|-----------|------|--------------------|----|
| | y information copied from such Reports and State for commercial purposes, other than using the nar | | | | | | | | | | |
| $\overline{\ }$ | NAME OF COMMITTEE (In Full) | | | | | | | | | | |
| \rangle | American Council of Life Insurers Politica | l Action (| Committee | | | | | | | | |
| | Full Name (Last, First, Middle Initial) Mr. Maurice Perkins | | | Da | ate of | Rece | eipt | | | | |
| | Mailing Address 101 Constitution Ave, NW Suite 700 | 1 | | |) 2 | / | 28 | / Y | ² (| 0 0 9 | |
| | City | State | Zip Code | Tra | nsac | tion | ID: PR | 80514 | 1911 | 6296 | |
| | Washington | DC | 20001-2133 | An | nount | of E | ach Red | eipt thi | s Pe | riod | |
| | FEC ID number of contributing federal political committee. | C | | | | 1 | | | 14 | 8.34 | |
| | American Council of Life | Occupation Vice Pres | n sident, Federal Relations | | | | | | | | |
| | Receipt For: Primary General Other (specify) ▼ | | e Year-to-Date ▼ 296.67 | P/R i-Mo | l Dec | duction | on (\$7 | 4.17 S | Sem- | - | |

| SUBTOTAL of Receipts This Page (optional) | • | 148.34 |
|---|----------|---------|
| TOTAL This Period (last page this line number only) | • | 7485.14 |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 12 / 29 (check only one) 11a 11b X 11c 12 13 14 15 16 17 |
|-------------|--|--------------------------------|---|---|
| Any or f | y information copied from such Reports and Sor commercial purposes, other than using the | Statements ma e name and ad | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) American Council of Life Insurers Pol | itical Action | Committee | |
| A. | Full Name (Last, First, Middle Initial) American Fidelity Corporation PAC | | | Date of Receipt |
| | Mailing Address P.O. Box 25523 | | | 02 13 2009 |
| | City | State | Zip Code | Transaction ID: 28253859 |
| | Oklahoma City FEC ID number of contributing | OK | 73125 | Amount of Each Receipt this Period |
| | federal political committee. | C CO | 0210526 | 5000.00 |
| | Name of Employer | Occupation | on | |
| | Receipt For: | Aggregate | e Year-to-Date 🔻 | |
| | Primary General Other (specify) ▼ | 0 0 | 5000.00 | |
| В. | Full Name (Last, First, Middle Initial) Guardian Life PAC | | | Date of Receipt |
| | Mailing Address 7 Hanover Square | | | 02 13 2009 |
| | City | State | Zip Code | Transaction ID: 28253861 |
| | New York | NY | 10004 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C C0 | 0173393 | 5000.00 |
| | Name of Employer | Occupation | on | |
| | Receipt For: | Aggregate | e Year-to-Date | |
| | Primary General Other (specify) ▼ | | 5000.00 | |
| с. | Full Name (Last, First, Middle Initial) Lincoln National Corporation PAC | | | Date of Receipt |
| | Mailing Address 1300 South Clinton St | treet | | 02 24 2009 |
| | City | State | Zip Code | Transaction ID: 28401483 |
| | Fort Wayne | IN | 46801 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C C0 | 0110577 | 5000.00 |
| | Name of Employer | Occupation | on | |
| | Receipt For: | Aggregate | e Year-to-Date | |
| | Primary General Other (specify) ▼ | 0 0 | 5000.00 | |
| sı | JBTOTAL of Receipts This Page (optional) . | | | 15000.00 |
| | OTAL This Period (last page this line number | | <u> </u> | 15000.00 |

A.

В.

C.

| SCHEDULE B (FEC Form 3X) | Use separate schedule(s) | | NUMBER: PAGE 13 / 29 |
|--|---|------------------------------|--|
| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | (check only 21b 27 | 22 X 23 24 25 2 28a 28b 28c 29 3 |
| any Information copied from such Reports and Statemor or for commercial purposes, other than using the name | | | |
| NAME OF COMMITTEE (In Full) American Council of Life Insurers Political A | · · · · · · · · · · · · · · · · · · · | | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: 28184063 |
| American Council of Life Insurers | | | Date of Disbursement |
| Mailing Address 101 Constitution Ave, NW Suite 700 | 1 | | $\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} & / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$ |
| • | State Zip Code | | Amount of Each Disbursement this Period |
| Washington Purpose of Disbursement | DC 20001 | | 130.83 |
| Portion of in-kind for 2/24 event, \$66.66 room renta | I, \$64.17 staff time and e-m | ail, ph o տի 🛊, compւ | |
| Candidate Name | | Category/ | |
| Mr. Alan Grayson Office Sought: X House Disburser | ment For: 2010 | Туре | |
| | Primary General Other (specify) | | Portion of in-kind for 2/- 24 event, \$66.66 room ren- tal, \$64.17 staff time and e-mail, phone, computer |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: 28184093 |
| American Council of Life Insurers | | | Date of Disbursement |
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| Candidate Name Mary Kilroy | | Category/ Type | |
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| | American Council of Life Insurers Political | Action Committee | | | | | | | | | | |
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| | Candidate Name Mr. Christopher Lee | pri otali tillo alla o mali, pr | | ategor Type | | | | | | | | |
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| | Mr. Erik Paulsen | | | Туре | | | | | | | | |
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| | Candidate Name Mr. Bill Posey | .s. 225 Svorit, 400 10011 | | otan tiill | s and o mail, pm | Ca | atego Type | ory/ | | | | | | | |
| | Office Sought: | Senate President | | nent For: Primary Other (spe | 2010 General | | | | 25 ev \$77 s | ent, \$ taff tii | n-kind 80 roc me an | m re d e-m | /- ntal, iail, | | |
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| | Office Sought: State: FL | X House Senate President District: 05 | | nent For: Primary Other (spe | 2010 General | | | | 19 ev tal, \$6 | ent, \$ 34.17 | n-kind 66.66 staff t one, co | room ime a | ren ınd | - | |
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| | Candidate Name Rep. Charles E | Boustany, Jr. | | | | | atego Type | - | | | | | | | |
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| American Council of Life Insurers Political A | Action Committee | | | | | | | | | | | |
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| Rep. Geoffrey Davis | | | Ту | ре | | | | | | | | |
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| Candidate Name | , , | | | gory/ | , T | - | | | | | | |
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| Candidate Name Rep. Peter Roskam | Category/ Type | |
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| Candidate Name Mr. Daniel Davis | Category/ Type | |
| Office Sought: X House Senate President State: IL District: 19 | rsement For: 2010 X Primary General Other (specify) ▼ | Portion of in-kind for 3/4 event, \$80 room rental, \$77 staff time and e-mail, phone, computer, etc. |
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| Candidate Name Rep. Bob Etheridge | Category/ Type | |
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| IV | Mailing Address | 101 Constitution Suite 700 | 1 Ave, NW | 1 | | | | | 0 2 | | 0.0 | | . 0 0 0 | |
| | City Vashington | | | State DC | Zip Code 20001 | | | | Amou | nt of Ead | h Disbu | | - | _ |
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| C | Candidate Name Mr. John Adler | οι ο, ο ονοπι, φον. 14 1 | oom remai, | φοο Stair ti | me and e man, p | Ca | tegory Γype | | • | | | | | |
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| _ | Candidate Name Andre Carson | | <u> </u> | | | | tegory Γype | / | | | | | | |
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| N | Mailing Address | 101 Constitution Suite 700 | n Ave, NW | I | | | | | 0 ^M 2 | M / C | 0 6 / | Y | óòs | Y |
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| N | Candidate Name Mr. Travis Chil | | | | | | itegory Γуре | / | | | | | | |
| C | Office Sought: | X House Senate President | Disburse X | ment For: Primary Other (spe | 2010 General | | | | event. \$55 s | \$57.14 taff time | kind for 4 room e and e uter, et | rental ·mail. | , | |
| S | State: MS | District: 01 | | | | | | | ριισιιε | , comp | ulei, el | | | |
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| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | |
| \rangle | American Council of Life Insurers Politica | Action Committee | | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) American Council of Life Insurers | | | | | ansa | | | | | 730 | | |
| | | | | | | ate of | _ | | men | t / Y | Ý | 0 ŏ 9 | Υ |
| | Mailing Address 101 Constitution Ave, N Suite 700 | | | | - | | | | | | | | |
| | City Washington | State Zip Code DC 20001 | | | Δ | mount | t of E | Each | Disb | urser | nent | this P | eric |
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| | Candidate Name Mr. Steven Driehaus | | | egory/ ype | | | | | | | | | |
| | Office Sought: X House Disburs | ement For: 2010 | - 1 | уре | P | ortion | of i | in-kiı | nd fo | or 3/ | 5 | | |
| | Senate President | C Primary GeneralOther (specify) ▼ | | | e\ \$ | ent, 9 5 sta | \$57. iff ti | .14 r me a | oom and | ren e-ma | ital, ail, | | |
| | State: OH District: 01 | _ | | | <u> </u> | ione, | | <u>'</u> | | | | | |
| | Full Name (Last, First, Middle Initial) American Council of Life Insurers | | | | | ansa ate of | | | _ | | 731 | | |
| | Mailing Address 101 Constitution Ave, N Suite 700 | W | | | [| ^м 2 ^м | / | 0 | ^D | / Y | ž | o ŏ 9 | Υ |
| | City Washington | State Zip Code DC 20001 | | | Α | mount | t of E | Each | Disb | urser | nent | this P | eric |
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| | Candidate Name Mr. Walter C. Minnick | · · · · · · · · · · · · · · · · · · · | Cat | egory/ ype | , Ct | | | | | | | | |
| | Senate President | ement For: 2010 Primary General Other (specify) | | | e\ \$5 | ortion ent, S 55 sta | \$57. aff ti | .14 r me a | oom and | n ren e-ma | ıtal. | | |
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| | American Council of Life Insurers | | | | | ate of | Disk | | | | | V | V |
| | Mailing Address 101 Constitution Ave, N Suite 700 | W | | | | 2 " |] | 0 | 6 | L | 2 | o ŏ 9 | |
| | City Washington | State Zip Code DC 20001 | | | Δ | moun | t of E | Each | Disb | urser | - | this P | |
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| | Candidate Name Mr. Gary Peters | | Cat | egory/ ype | | | | | | | | | |
| | | ement For: 2010 Primary General Other (specify) | | | e\ \$! | ortion ent, S 55 sta | \$57. iff ti | .14 r me a | oom | ren e-ma | 5 Ital, ail, | | |
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| | State: MI District: 09 | | | | | | | | | | | | |

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| ITEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | 21b | <u> </u> | | | | | |
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| Full Name (Last, First, Middle Initial) | | | Transaction ID: 28375007 | | | | | |
| Garrett for Congress | | | Date of Disbursement | | | | | |
| Mailing Address P.O. Box 905 | | | 0 2 M / D 1 9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | |
| City Newton | State Zip Code NJ 07860 | | Amount of Each Disbursement this Perio | | | | | |
| Purpose of Disbursement | | 011 | 1000.00 | | | | | |
| Candidate Name Scott Garrett | | Category/ Type | | | | | | |
| Senate President | rsement For: 2010 X Primary General Other (specify) ▼ | | | | | | | |
| State: NJ District: 05 Full Name (Last, First, Middle Initial) | | | Transaction ID: 28375055 | | | | | |
| South Dakota First PAC | | | Date of Disbursement | | | | | |
| Mailing Address 122 Maryland Ave, NE | | | 02 19 7 2009 | | | | | |
| City Washington | State Zip Code DC 20002 | | Amount of Each Disbursement this Period | | | | | |
| Purpose of Disbursement | | 011 | 2500.00 | | | | | |
| Candidate Name South Dakota First PAC | | Category/ Type | | | | | | |
| Office Sought: House Disbut Senate President State: District: | rsement For: Primary General Other (specify) | | | | | | | |
| Full Name (Last, First, Middle Initial) Friends Of Sherrod Brown | | | Transaction ID: 28375056 Date of Disbursement | | | | | |
| Mailing Address PO Box 76187 Suite 800 | | | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | | | | |
| City Washington | State Zip Code DC 20013 | | Amount of Each Disbursement this Period | | | | | |
| Purpose of Disbursement | | 011 | 1000.00 | | | | | |
| Candidate Name Sen. Sherrod Brown | | Category/ Type | | | | | | |
| X Senate President | rsement For: 2012 X Primary General Other (specify) ▼ | | | | | | | |
| State: OH District: | | | | | | | | |
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| ITEMIZED DISBURSEMENTS | Detailed Summary Page | 21b 22 X 23 24 25 27 28a 28b 28c 29 |
| Any Information copied from such Reports and State or for commercial purposes, other than using the na | | |
| NAME OF COMMITTEE (In Full) American Council of Life Insurers Political | · · | |
| Full Name (Last, First, Middle Initial) DeMint for Senate Committee | | Transaction ID: 28375062 Date of Disbursement |
| Mailing Address P.O. Box 2776 | | 02 19 / 2009 |
| City Arlington | State Zip Code VA 22202 | Amount of Each Disbursement this Period |
| Purpose of Disbursement | 011 | 1000.00 |
| Candidate Name Jim DeMint | Catego Type | |
| X Senate President | sement For: 2010 K Primary General Other (specify) | |
| State: SC District: Full Name (Last, First, Middle Initial) | | Transaction ID: 28375063 |
| Bill Nelson For U S Senate Mailing Address 500 Red Sail Way | | Date of Disbursement Date of Disbursement |
| City | State Zip Code | Amount of Each Disbursement this Perio |
| Satelite Beach | FL 32937 | |
| Purpose of Disbursement | 011 | 1000.00 |
| Candidate Name Sen. Bill Nelson | Catego Type | • |
| 9 🗎 | sement For: 2012 K Primary General Other (specify) | |
| Full Name (Last, First, Middle Initial) Wyden for Senate | | Transaction ID: 28375065 Date of Disbursement |
| Mailing Address 123 NE 3rd Suite 321 | | 02 19 7 2009 |
| City Portland | State Zip Code OR 97232 | Amount of Each Disbursement this Perio |
| Purpose of Disbursement | 011 | 1000.00 |
| Candidate Name Ron Wyden | Catego Type | |
| X Senate President | sement For: 2010 C Primary General Other (specify) | |
| State: OR District: | | |
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| NAME OF COMMITTEE (In Full) American Council of Life Insurers Politica | · · · · · · · · · · · · · · · · · · · | | |
| Full Name (Last, First, Middle Initial) Friends of Schumer | | | Transaction ID: 28375066 Date of Disbursement |
| Mailing Address 60 Madison Ave Suite | 026 | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & Y \\ Z & O & Q & S \end{bmatrix} $ |
| City New York | State Zip Code NY 10010 | | Amount of Each Disbursement this Perio |
| Purpose of Disbursement | | 011 | 5000.00 |
| Candidate Name Charles Schumer | | Category/ Type | |
| X Senate President | sement For: 2010 X Primary General Other (specify) | | |
| State: NY District: Full Name (Last, First, Middle Initial) | | | T 11 ID 00075007 |
| Blue Dog PAC | | | Transaction ID: 28375067 Date of Disbursement |
| Mailing Address 227 Massachusetts Ave Suite 101 | e, NE | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & P \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & P \\ I & Q & I & Q \end{bmatrix} $ |
| City Washington | State Zip Code DC 20002 | | Amount of Each Disbursement this Perio |
| Purpose of Disbursement | | 011 | 2500.00 |
| Candidate Name Blue Dog PAC | | Category/ Type | |
| Senate President | sement For: Primary General Other (specify) ▼ | | |
| State: District: Full Name (Last, First, Middle Initial) Friends of Max Baucus | | | Transaction ID: 28375069 Date of Disbursement |
| Mailing Address 818 Connecticut Ave, N Suite 1100 | W | | 02 |
| City Washington | State Zip Code DC 20006 | | Amount of Each Disbursement this Perio |
| Purpose of Disbursement | | 011 | 1000.00 |
| Candidate Name Max Baucus | | Category/ Type | |
| X Senate President | sement For: 2014 X Primary General Other (specify) ▼ | | |
| State: MT District: | | | |
| | | | 8500.00 |

| | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 25 / 29 (check only one) |
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| | | e and address of any political comn | ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee |
| <u> </u> | Full Name (Last, First, Middle Initial) Kind For Congress Committee Mailing Address 1207 C Street, NE | | Transaction ID: 28375071 Date of Disbursement M M M / D D D / Y Y Y O Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City Washington Purpose of Disbursement | State Zip Code DC 20002 | Amount of Each Disbursement this Period |
| | Candidate Name Rep. Ron Kind | Cat | egory/ ype |
| | | ement For: 2010 Primary General Other (specify) | |
| | Full Name (Last, First, Middle Initial) Royce Campaign Committee Mailing Address P.O. Box 2525 | | Transaction ID: 28375094 Date of Disbursement O 2 D D D D D D D D D D D D D D D D D D |
| | City Orange Purpose of Disbursement | State Zip Code CA 92859 | Amount of Each Disbursement this Period 500.00 |
| | Senate President | | egory/ ype |
| | State: CA District: 40 Full Name (Last, First, Middle Initial) Rob Portman for US Senate | | Transaction ID: 28375098 Date of Disbursement |
| | Mailing Address 900 19th Street, NW 8th Floor | | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ |
| | City Washington | State Zip Code DC 20006 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Candidate Name Mr. Rob Portman | Cat | 2500.00 011 egory/ |
| | Office Sought: House Disburs | ement For: 2010 Primary General Other (specify) | уре |
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| NAME OF COMMITTEE (In Full) American Council of Life Insurers Politic | · · · | |
| Full Name (Last, First, Middle Initial) Melissa Bean For Congress | | Transaction ID: 28375100 Date of Disbursement |
| Mailing Address Post Office Box 3068 | | 02 0 19 7 2009 |
| City Barrington | State Zip Code IL 60010 | Amount of Each Disbursement this Period |
| Purpose of Disbursement | 01 | 2500.00 |
| Candidate Name Rep. Melissa Bean | Categ Typ | |
| Senate President | sement For: 2010 X Primary General Other (specify) | |
| State: IL District: 08 | | |
| Full Name (Last, First, Middle Initial) Levin For Congress | | Transaction ID: 28375101 Date of Disbursement |
| Mailing Address P.O. Box 37 | | 02 19 7 2009 |
| City Roseville | State Zip Code MI 48066 | Amount of Each Disbursement this Perio |
| Purpose of Disbursement | 01 | 1 1000.00 |
| Candidate Name Rep. Sander Levin | Categ Typ | |
| Senate President | sement For: 2010 X Primary General Other (specify) | |
| State: MI District: 12 Full Name (Last, First, Middle Initial) | | Transaction ID: 28375102 |
| Grassley Committee | | Date of Disbursement |
| Mailing Address 5327 Holmes Run Park | way | 02 19 / 2009 |
| City Alexandria | State Zip Code VA 22304 | Amount of Each Disbursement this Perio |
| Purpose of Disbursement | , 01 | |
| Candidate Name Chuck Grassley | Categ Typ | |
| X Senate President | sement For: 2010 Primary X General Other (specify) | |
| State: IA District: | | |
| | | 5500.00 |

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| | Full Name (Last, F | First, Middle Initial) | | | | | | | Trar | sacti | on ID | : 283 | 75177 | 7 | |
| | American Council of Life Insurers | | | | | | | Date of Disbursement | | | | | | | |
| | Mailing Address 101 Constitution Ave, NW Suite 700 | | | | | | | $ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} \begin{bmatrix} D & D \\ 0 & 4 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$ | | | | | | | |
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| | Candidate Name Rep. Bill Foster | | om ronta | ., ψυτ. 17 5 | an ano and 6-III | Ca | atego | ry/ | | | | | | | |
| | Office Sought: | | Disburse | ment For: | 2010 | | Турє | • | _ | | | | | | |
| | | Senate President | | Primary Other (spe | General | | | | 24 e | vent, 64.1 | \$66. 7 sta | ind for 67 roc Iff time | m rer | 1- | |
| | State: IL | District: 14 | _ ' | | <i>→</i> | | | | e-m | ail, pl | none, | comp | uter | | |
| 3. | Full Name (Last, First, Middle Initial) American Council of Life Insurers | | | | | | | | | | : 283 ement | 75190 |) | | |
| | Mailing Address 101 Constitution Ave, NW Suite 700 | | | | | | | | 02 / 0 | [′] | 06 | Y | ó o ò s | 9 ^Y | |
| | City Washington | Canto 700 | | State DC | Zip Code 20001 | | | | Amo | ount o | f Each | n Disbui | semer | nt this f | Perio |
| | Purpose of Disbui | | | | | bana | Order | | | | | | | 112.1 | 5 |
| | Candidate Name | for 3/5 event, \$57.14 roc | ım rentai, | ५ 55 डावा । | ime and e-maii, p | Ca | atego | ry/ | et | | | | | | |
| | Jackie Speier | Tel Herri | D'-1 | | 0010 | | Туре |) | - | | | | | | |
| | Office Sought: | X House Senate President | | ment For: Primary Other (spe | 2010 General | | | | Port ever \$55 | ion o it, \$5 staff | f in-k 7.14 time | ind for room and e | 3/5 rental mail. | , | |
| | State: CA | District: 12 | | O (Op . | √ | | | | phoi | ne, co | ompu | iter, et | , | | |
| | Full Name (Last, F Corner Bakery | First, Middle Initial) | | | | | | | 1 | | | : 284 ement | 93339 |) | |
| | Mailing Address | 529 14th Street, N Suite F11 | 1W | | | | | | 0 ^M 2 | 2 M | D 2 | 24 | Y | ó o ò s | 9 ^Y |
| | City Washington | Juno I II | | State DC | Zip Code 20045 | | | | Amo | ount o | f Each | Disbu | semer | nt this f | Perio |
| | Purpose of Disbui | rsement catering for 2/25/09 Mee | | | | Г | 011 | | | | | | | 166.4 | 0 |
| | Candidate Name Lynn Jenkins | 5 g . 2. <u>2</u> 20,00 . Mot | | | | | atego Type | ry/ | | | | | | | |
| | Office Sought: | X House Senate | | ment For: Primary | 2010 General | | | | In-K | ind p or 2/2 | ortior 25/09 | n of ca Meet | teri- and | | |
| | State: KS | President District: 02 | | Other (spe | ecify) | | | | Gree | et Lui | nch | | | | |
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| NAME OF COM | IMITTEE (In Full) uncil of Life Insurers F | | | | | |
| Full Name (Last | , First, Middle Initial) | | | | Transaction ID: 28493545 | |
| Corner Baker | | Date of Disbursement M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| Mailing Address | 529 14th Street, N Suite F11 | | 02 24 2009 | | | |
| City Washington | | State DC | Zip Code 20045 | | Amount of Each Disbursement this Period | |
| <u> </u> | of catering for 2/25/09 Med | 166.40 | | | | |
| Candidate Name Mr. Leonard L | | | | Category/ Type | | |
| Office Sought: | Senate President | Disbursement For: X Primary Other (sp | 2010 General pecify) | | In-Kind portion of cateri- ng for 2/25/09 Meet and Greet Lunch | |
| State: NJ | District: 07 | | | | | |
| Full Name (Last Corner Baker | , First, Middle Initial) / | | Transaction ID: 28493557 Date of Disbursement | | | |
| Mailing Address | 529 14th Street, N | | $ \begin{bmatrix} M & M \\ 0 & 2 \end{bmatrix} \begin{bmatrix} D & 2 & 4 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$ | | | |
| City Washington | | State DC | Zip Code 20045 | | Amount of Each Disbursement this Period | |
| Purpose of Disb In-Kind portion of | ursement of catering for 2/25/09 Med | et and Greet Lunch | 011 | 166.39 | | |
| Candidate Name Mr. Christoph | | | | Category/ Type | | |
| Office Sought: | X House Senate President District: 26 | Disbursement For: X Primary Other (sp | 2010 General pecify) | , | In-Kind portion of cateri- ng for 2/25/09 Meet and Greet Lunch | |
| | , First, Middle Initial) | | | | Transaction ID: 28493558 Date of Disbursement | |
| Mailing Address | 529 14th Street, N | ١W | | | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | |
| City Washington | Suite F11 | State DC | Zip Code 20045 | | Amount of Each Disbursement this Perio | |
| Purpose of Disb | ursement of catering for 2/25/09 Med | 011 | 166.39 | | | |
| Candidate Name Mr. Erik Pauls | | Category/ Type | | | | |
| Office Sought: | X House Senate President | Disbursement For: X Primary Other (sp | 2010 General | | In-Kind portion of cateri- ng for 2/25/09 Meet and Greet Lunch | |
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| State: MN | District. 05 | | | | I | |

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| \rangle | NAME OF COMMITTEE (In Full) American Council of Life Insurers | Political Action Committee | | |
| | Full Name (Last, First, Middle Initial) Corner Bakery Mailing Address 529 14th Street, Suite F11 | NW | | Transaction ID: 28493560 Date of Disbursement M M / D D D / Y Y Y O O 9 |
| | City Washington Purpose of Disbursement In-Kind portion of catering for 2/25/09 Me | State Zip Code DC 20045 | 011 | Amount of Each Disbursement this Period |
| | Candidate Name Mr. Bill Posey | | Category/ Type | |
| | Office Sought: X House Senate President State: Fl. District: 15 | Disbursement For: 2010 X Primary General Other (specify) | | In-Kind portion of cateri- ng for 2/25/09 Meet and Greet Lunch |

| SUBTOTAL of Disbursements This Page (optional) | • | 166.39 |
|---|----------|----------|
| TOTAL This Period (last page this line number only) | <u> </u> | 30256.97 |